MULTIPLE DER DENT CLAIM FEE CALCUL ON SHEET (FOR USE WITH FORM PTO-875)

FILING DATE

SERIAL NO.

CLAIMS

		IND.	DEP.	IND.	DEP.			IND.	DED		NDMENT	2™AME	
					ı	, <u> </u>		44110.	DEP.	IND.	DEP.	IND.	DE
			-/-		 	-	51						<u> </u>
			•/			 -	52 53			<u> </u>			
				•	 	i F	54			 		- 1	
						-	55	- 			 		
		-					56			1	 		
		<i>\</i>			· ·		57						
		-/	 -			<u> </u>	58						
	1787	/			·	<u> </u>	59	·					
		/			· .	-	60 61			·			
	(1)	7					62				<u> </u>		·
			./				63		- :				
180							64 .						
180			/	· .		· .	65						
M	-14		/			<u> </u>	66	[·				
		 				. -	67						
VA		/					68 69		-		· .]	
							70						
V		$\angle \Box$					71						٠.
14			$-\mathcal{A}$				72						<u>··</u>
1			/-	<u>-</u>			73						
140			/ 				74						
187	(%)	/				-	75 76	 -		- 1	<u>-</u>		
18	I A						77	-+					
10/	-10°	4					78		-		— <u> </u>		
							79 .						•
			╌┼╌╂				80						
-			· 				81						
<u> </u>			-				82 83						
·							84						
<u>:</u>					·		85						
			-				86						-
			-				87	7 7 7 7					
.	 		-{				88	-					
 			1 1				89 90						
	171						91						
							92						
							93						
 			- -			-	94						
-							95						
			- -				96 97						
		 -	1-1					 					
											-		
		1											
			4		*			i.	#	2	8		1
] 🔱	4=	•	(=		4	тот	L DEP.		(=	26	, ' F		4
♦ ■			d: \							クダ			
		4=	4	42	4 4		TOTAL COLUMN TOTAL	98 99 100 TOTAL IND. TOTAL DEP. TOTAL CLAIMS	98 99 100 TOTAL IND. TOTAL DEP TOTAL CLAIMS	98 99 100 TOTAL IND. TOTAL CLAIMS	98 99 100 TOTALIND. TOTAL LAIMS TOTAL CLAIMS 98 99 100 TOTAL LAIMS	98 99 100 TOTAL IND. TOTAL DEP. TOTAL CLAIMS 98 99 100 TOTAL CLAIMS	98 99 100 TOTAL IND. TOTAL LEP TOTAL CLAIMS US DEPARTMENT OF A COMMENT